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Legislative
Assembly
of Ontario



Assemblée
législative
de l'Ontario

Official Report of Debates (Hansard)

M-19

Journal des débats (Hansard)

M-19

Standing Committee on the Legislative Assembly

Protecting Patients Act, 2017

Comité permanent de l'Assemblée législative

Loi de 2017 sur la protection
des patients

2nd Session
41st Parliament

Wednesday 17 May 2017

2^e session
41^e législature

Mercredi 17 mai 2017

Chair: Monte McNaughton
Clerk: William Short

Président : Monte McNaughton
Greffier : William Short



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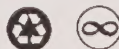
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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON
THE LEGISLATIVE ASSEMBLYCOMITÉ PERMANENT DE
L'ASSEMBLÉE LÉGISLATIVE

Wednesday 17 May 2017

Mercredi 17 mai 2017

The committee met at 1303 in committee room 1.

PROTECTING PATIENTS ACT, 2017

LOI DE 2017 SUR LA PROTECTION
DES PATIENTS

Consideration of the following bill:

Bill 87, An Act to implement health measures and measures relating to seniors by enacting, amending or repealing various statutes / Projet de loi 87, Loi visant à mettre en oeuvre des mesures concernant la santé et les personnes âgées par l'édiction, la modification ou l'abrogation de diverses lois.

The Chair (Mr. Monte McNaughton): Good afternoon, everyone. Welcome to the Standing Committee on the Legislative Assembly. We're here to deal with clause-by-clause consideration of Bill 87, An Act to implement health measures and measures relating to seniors by enacting, amending or repealing various statutes.

Just a few announcements and reminders for the committee: 12:45 was the hard deadline for amendments, so there will be no further amendments allowed. This committee is permitted to sit until 7 p.m. tonight. At 3 p.m., those amendments which have not yet been moved shall be deemed to have been moved, and the Chair of the Committee shall interrupt the proceedings and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments thereto, with one 20-minute waiting period, pursuant to standing order 129(a), being permitted.

As well, I would like to remind or advise committee members that there were two amendments submitted prior to the deadline, so please insert those into your packages: motions 103.1 and 103.2. You'll just want to slip those into your package.

Are there any comments in general to any section of the bill? And if so, which section? Seeing none, we'll begin.

I'd like to seek unanimous consent to stand down sections 1 to 3 to deal with the schedules first. Is there agreement in the committee? Agreed?

M^{me} France Gélinas: Say that again?

The Chair (Mr. Monte McNaughton): I'd like to stand down section 1 to 3 to deal with the schedules first.

M^{me} France Gélinas: Schedule 4 first?

The Chair (Mr. Monte McNaughton): We're just going to go to the schedules. We'll stand down sections 1, 2 and 3, and we'll start with schedule 1.

M^{me} France Gélinas: Sure.

The Chair (Mr. Monte McNaughton): That's generally what we do. Agreed? Agreed.

We'll move to NDP amendment 1. Ms. Gélinas.

M^{me} France Gélinas: I move that the bill be amended by adding the following schedule:

"Schedule 0.1

"Drug and Pharmacies Regulation Act

"1. The definition of 'registered pharmacy student' in subsection 1(1) of the Drug and Pharmacies Regulation Act is repealed and the following substituted:

"'"intern technician" means a person registered as an intern technician under the Pharmacy Act, 1991;"

"2. Subsection 139(5) of the act is amended by adding the following paragraph:

"'3. Subsections 17(2) and (3)."

"3(1) Subsection 140(2) of the act is amended by striking out 'interim orders where such allegations are referred to the committee'.

"(2) Section 140 of the act is amended by adding the following subsection:

"'Interim order

"(2.0.1) The accreditation committee may at any time make an interim order directing the registrar to suspend, or to impose terms, conditions or limitations on, a certificate of accreditation, if it is of the opinion that the conduct or operation of a pharmacy is likely to expose a patient, or a member of the public, to harm or injury.

"'Procedure

"(2.0.2) The provisions of the health professions procedural code dealing with interim suspension orders made by the inquiries, complaints and reports committee or a panel of the committee apply, with necessary modifications, to interim suspension orders made by the accreditation committee under subsection (2.0.1).

"(3) Subsection 140(2.1) of the act is amended by striking out 'section 37' and substituting 'section 25.4'.

"4(1) Clause 149(1)(c) of the act is amended by striking out 'a registered pharmacy student' at the beginning and substituting 'a student who is in the course of fulfilling the educational requirements to become a member of the college'.

"(2) Clause 149(1)(d) of the act is amended by adding 'or an intern technician' after 'a pharmacy technician'.

“(3) Subsection 149(3) of the act is repealed and the following substituted:

“Remote dispensing locations

“(3) Despite clause (1)(d), a pharmacy technician may compound, dispense or sell a drug in a remote dispensing location without a pharmacist being physically present to supervise, as long as a pharmacist is actively supervising the pharmacy technician and,

“(a) a certificate of accreditation has been issued permitting the operation of the remote dispensing location; and

“(b) the remote dispensing location is operated in accordance with the regulations.”

“(5) Subsection 156(2) of the act is amended by striking out ‘two years’ at the end and substituting ‘10 years’.

“(6) This schedule comes into force on a day to be named by proclamation of the Lieutenant Governor.”

The Chair (Mr. Monte McNaughton): I’m going to rule this amendment out of order. It attempts to open an act that is not included in this bill. After all that effort, I hate to rule it out of order.

M^{me} France Gélinas: Can I ask for unanimous consent to consider it?

The Chair (Mr. Monte McNaughton): You can, yes. Is there unanimous consent? Agreed? Agreed.

Further debate?

M^{me} France Gélinas: I will let my colleague talk for a while.

The Chair (Mr. Monte McNaughton): Any other comments? Mr. Fraser.

Mr. John Fraser: We’ll be supporting this motion. It does achieve the same policy outcomes that I think we’ve been trying to get here. Although it is out of scope, it’s in the intent. We’ll be supporting this motion.

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The Chair (Mr. Monte McNaughton): Further debate? Mr. Yurek.

Mr. Jeff Yurek: We’ll be supporting this motion as well. It’s just updating the changes that have occurred in professional pharmacy over a number of years. As I said, it doesn’t change the scope of the bill in any shape or form.

The Chair (Mr. Monte McNaughton): Any further debate?

M^{me} France Gélinas: I will save my voice. I’m happy to see the support.

The Chair (Mr. Monte McNaughton): Okay. We’ll put the question. All those in favour? Opposed? Carried.

We’ll now move to PC amendment 1.1 in schedule 1, section 1. Mr. Yurek.

Mr. Jeff Yurek: I move that schedule 1 to the bill be amended by adding the following subsection:

“(0.1) Section 1 of the Immunization of School Pupils Act is amended by adding the following definition:

“‘child’ means a person younger than 18;”

The Chair (Mr. Monte McNaughton): Any further debate, Mr. Yurek?

Mr. Jeff Yurek: No. It’s pretty open.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: We won’t be supporting this motion as it is commonly understood through other pieces of Ontario legislation that a child is under the age of 18—like if you looked at the Protecting Child Performers Act or the Parental Responsibility Act. We don’t believe that it’s necessary so we won’t be supporting the motion.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I think it is wise to define what a child is in this bill because in health care, you often start as early as age 14 and 15 to get consent from the child directly. Children are allowed to make decisions for themselves, as opposed to at 18 years of age. So to specifically mention 18 years I think is a wise move.

The Chair (Mr. Monte McNaughton): Any further debate? Seeing none, all those in favour? Opposed? I declare the motion lost.

We’ll move to NDP amendment 1.2. Madame Gélinas.

M^{me} France Gélinas: Can I ask for a huge favour? Does anybody have a Halls, until somebody comes from my office, before I can speak no more?

Interjections.

The Chair (Mr. Monte McNaughton): Lots of volunteers.

Mr. John Fraser: I have a Halls.

M^{me} France Gélinas: You have a Halls? I will be forever grateful.

Sorry again, Chair.

The Chair (Mr. Monte McNaughton): That’s okay.

M^{me} France Gélinas: I move that section 1 of schedule 1 to the bill be amended by adding the following subsection:

“(0.1) Section 1 of the Immunization of School Pupils Act is amended by adding the following definition:

“‘child’ means a person under the age of 17 years; (‘enfant’)”

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: Because this is a very contentious piece of legislation for some—we know that there are people who oppose the immunization of their children. We know that the list of vaccinations includes youth in the ages of 14, 15, 16 and 18. I think it is wise to put it in in order to avoid having a whole bunch of health units having to argue that children who are 15 or 16 years old are old enough to make decisions for themselves. Therefore, putting it in the bill settles a lot of heartache down the road.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: We will be opposing the motion for the same reasons that I set out in the last amendment put forward.

The Chair (Mr. Monte McNaughton): Okay. Any further debate? We’ll put the question, then. All those in favour? Opposed? I declare this amendment lost.

We’ll move to PC amendment number 2. Mr. Yurek.

Mr. Jeff Yurek: I move that section 1 of schedule 1 to the bill be amended by adding the following subsection:

“(3) Section 1 of the act is amended by adding the following definition:

“‘qualified pharmacist’ means a member of the Ontario College of Pharmacists who is authorized under the Pharmacy Act, 1991 to administer an immunizing agent to a child in relation to a designated disease;”

The Chair (Mr. Monte McNaughton): Any debate, Mr. Yurek?

Mr. Jeff Yurek: I just think adding in qualified pharmacists in addition to nurses and physicians fits what is occurring today, as of now, given the fact that pharmacists have an expanded scope of practice with delivering injections. As other scopes of practice change, that would be for the other section in this bill. I think it's respectful to pharmacists at this point in time and important to add.

The Chair (Mr. Monte McNaughton): Further debate? Ms. Gélinas.

M^{me} France Gélinas: I will be supporting this motion. I agree that every health professional should be allowed to work to their full scope. We have seen some success with having pharmacists deliver vaccines, the flu vaccine being one. Although the mechanism to get there does not exist in Ontario, I think to put it in the bill will at least keep that door open if there are opportunities for pharmacists to participate in school pupil immunization later on.

The Chair (Mr. Monte McNaughton): Further debate? Mr. Fraser.

Mr. John Fraser: We won't be supporting the motion, as “prescribed person” already allows for pharmacists to be added in regulation.

The Chair (Mr. Monte McNaughton): Mr. Yurek?

Mr. Jeff Yurek: I think it's unfortunate that this government is not recognizing the abilities—they have already expanded the scope of practice with pharmacists. They duly require the respect. The other professions currently who are performing it are named in this bill. It's unfortunate. They're not other prescribed people; they are a health care professional with already the authority and scope to provide injections.

As the member from the third party stated, they've been quite successful at ensuring that the number of Ontarians receiving the influenza vaccination each year has rapidly increased. It has been such a success. The pharmacists will play a key role in the ongoing expansion of availability of vaccinations. It has been the profession that is most accessible in all of our communities: northern, rural, urban. I think it's fitting, and I would hope the government would reconsider their decision and maybe support one of the Conservative amendments in this package that we do have. Hopefully, this is one of them.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare the amendment lost.

Shall schedule 1, section 1 carry? All those in favour? Carried.

Schedule 1, section 2: We'll move to PC amendment number 3. Mr. Yurek.

Mr. Jeff Yurek: PC amendment 3?

The Chair (Mr. Monte McNaughton): PC amendment 3.

Mr. Jeff Yurek: Sorry. I'm way ahead of myself.

I move that subsection 3(3) of the act, as set out in section 2 of schedule 1 to the bill, be struck out.

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: We've listened to some concerns of those coming forward. What I've heard is that, for the 2% of those not willing to have vaccinations, educational sessions aren't really going to change their minds. We also heard that the Ministry of Health is ill-prepared to carry out the educational sessions in rural and northern Ontario, mainly due to either there being no funding available and/or no Internet access if they wish to have these educational sessions through the Internet. It's not accessible for many outside of urban areas.

In addition, we do appreciate the role that pediatricians and family doctors play in educating their patients at the time of check-ups and feel that they could play a more important role in ensuring that education is disseminated to these parents.

The Chair (Mr. Monte McNaughton): Further debate? Further debate? No? All those in favour? Opposed? I declare the motion lost.

Shall schedule 1, section 2 carry? Carried.

We'll move to schedule 1, section 3, and PC amendment number 4. Mr. Yurek.

Mr. Jeff Yurek: I move that subclause 6(2)(a)(i) of the act, as set out in section 3 of schedule 1 to the bill, be amended by adding “qualified pharmacist” after “nurse”.

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

1320

M^{me} France Gélinas: I think it's a respectful thing to do, to actually name them. We know that we've had success with immunization through pharmacists. To put them in the bill doesn't guarantee any changes to our health care system, but it makes it clear that we are interested in having every health care provider work to their full scope.

The Chair (Mr. Monte McNaughton): Further debate?

Mr. John Fraser: Chair, we'll be opposing this motion for the same reasons set aside for the previous motion. With regard to “prescribed person,” it already allows pharmacists to be added by regulation.

The Chair (Mr. Monte McNaughton): Further debate? Okay. All those in favour? Opposed? I declare the motion lost.

Shall schedule 1, section 3 carry? Carried.

We move to schedule 1, section 4, and PC amendment number 5. Mr. Yurek?

Mr. Jeff Yurek: I move that subsection 10(2) of the act, as set out in section 4 of schedule 1 to the bill, be amended by adding “qualified pharmacist” after “nurse”.

The Chair (Mr. Monte McNaughton): Mr. Yurek, would you please read that again? You said (2) instead of (1). It's PC amendment number 5.

Mr. Jeff Yurek: Sorry. Excuse me. I just keep getting rejected here. I'm just getting lost.

I move that subsection 10(1) of the act, as set out in section 4 of schedule 1 to the bill, be amended by adding “qualified pharmacist” after “nurse”.

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: Again, I'm reaching out to the government to show some respect to this health care professional which has been added to the scope of practice and is clearly a positive piece of the vaccination plan of the government.

I think pharmacists deserve the same respect as doctors and nurses in regard to their professionalism and the fact that they're the most accessible health care provider throughout the entire province. They're doing a wonderful job, and shouldn't just be relayed as a “prescribed person.” If that's the case, then I don't know why they don't just strike out “doctor” and “nurse” and just put “prescribed person” across the board and add everyone to the regulations.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I agree that pharmacists are the health care professional most likely to be added under “prescribed person.” It wouldn't hurt to put them in the bill, to basically respect who they are and respect their scope of practice.

The Chair (Mr. Monte McNaughton): Further debate? Okay. All those in favour? Opposed? I declare the motion lost.

PC amendment number 6.

Mr. Jeff Yurek: I think I've got this one right. I move that subsection 10(2) of the act, as set out in section 4 of schedule 1 to the bill, be amended by adding “qualified pharmacist” after “nurse”.

The Chair (Mr. Monte McNaughton): Any debate? All those in favour? Opposed? I declare that motion lost.

PC amendment number 6: Mr. Yurek.

Interjection.

The Chair (Mr. Monte McNaughton): I'm sorry. PC amendment number 7: Mr. Yurek.

Mr. Jeff Yurek: Right. I move that subsection 10(2) of the Immunization of School Pupils Act, as set out in section 4 of schedule 1 to the bill, be struck out.

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: Basically, the reporting of immunizations is just creating an extra burden on the health care system. We heard from many public health units and physicians that the system is just not ready to handle this unless electronic means are available.

The Chair (Mr. Monte McNaughton): Madame Gélinas?

M^{me} France Gélinas: I agree with what was just said. When the health units come and make it really clear—“Please don't do this. We don't have the means. We don't have the staff. We don't have the capacity to handle every single immunization from every single provider until an electronic solution is found”—I think it would be wise to delete this part from the bill, so that we give electronic technology a chance to catch up with the times.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that motion lost.

We'll move to NDP amendment 7.1. Madame Gélinas.

M^{me} France Gélinas: I think my motion is exactly the same as his.

The Chair (Mr. Monte McNaughton): It is, so we'll rule that out of order.

We'll move now to PC amendment number 8. Mr. Yurek?

Mr. Jeff Yurek: I move that section 4 of schedule 1 to the bill be amended by adding the following subsection:

“(2) Section 10 of the act is amended by adding the following subsection:

““Limitation, electronic reporting

“(3) Subsection (2) applies only to the extent that the physician, nurse or prescribed person has the capacity to provide the information to the medical officer of health directly through an electronic reporting method used by all public health units.”

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek?

Mr. Jeff Yurek: Again, we're trying to prevent unintended consequences of either overburdening the system with mail and/or fax, added costs to the system and/or duplicates being recorded in the system, or recorded immunizations being lost. Until this government gets its act together and has an electronic format which is compatible with doctors' offices, nurses' offices, pharmacists and emergency rooms, so the health units can intake the data with little error, we believe that this part of the section should be held off until that becomes available.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I fully support the intent of the bill. We want to have a robust record of who is immunized and who is not. The aim of the bill is good, and I think we all support it, but we also have to be cognizant that when we put in legislation mandatory things that must happen that we cannot do, we're setting ourselves up for failure.

What the PC motion basically puts in is: We make it clear inside the legislation that there is a limitation and that electronic reporting has to be there in order for this very good goal, which we all want, to happen. We have to have electronic reporting; otherwise, we're setting all

of ourselves up for failure. I think it is wise to put it in the bill. This way, health units will know exactly what is expected of them.

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: We won't be supporting this. The amendment is not necessary.

Section 10 of schedule 1 in this bill would not come into force until it is proclaimed by the Lieutenant Governor, which permits the Lieutenant Governor to proclaim amendments in force when technical solutions are in place. So it gives the ministry an opportunity to work with stakeholders to get it right.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I'd like to ask legal counsel on that. Is it true that the Lieutenant Governor could put limitations on a bill? I thought the Lieutenant Governor just said yea or nay. I didn't think they had the power to add or subtract anything to a bill.

Mr. Ralph Armstrong: Ralph Armstrong, legislative counsel office. I think there may be a misunderstanding. A proclamation is only for a set day. I understood the parliamentary assistant to be saying that the Lieutenant Governor would not make the proclamation until the technological measures were in place. If I'm misunderstanding, I apologize.

The Chair (Mr. Monte McNaughton): Mr. Fraser.

Mr. John Fraser: Sorry. Pardon me—that section of the bill.

The Chair (Mr. Monte McNaughton): Is that all, Mr. Fraser?

Mr. John Fraser: That's it, yes.

The Chair (Mr. Monte McNaughton): Madame Gélinas, further debate?

M^{me} France Gélinas: So that I fully understand: Schedule 1 of this bill could be proclaimed except for 10(2)?

Mr. Ralph Armstrong: In section 7 we see: "This schedule comes into force on a day to be named by proclamation of the Lieutenant Governor."

If we go back to subsection 2(3), one of the provisions that we skipped over on the way to the schedules, we see that, "If a schedule to this act provides that any provisions are to come into force on a day to be named by proclamation of the Lieutenant Governor, a proclamation may apply to one or more of those provisions, and proclamations may be issued at different times with respect to any of those provisions."

So one of the provisions of schedule 1 can come into force at a different time than another provision. The whole schedule doesn't need to come into force at the same time, if the government doesn't want it to.

M^{me} France Gélinas: Thank you.

The Chair (Mr. Monte McNaughton): Further debate? All in favour? Opposed? I declare that amendment lost.

1330

We'll move to PC amendment number 9: Mr. Yurek.

Mr. Jeff Yurek: I move that section 4 of schedule 1 to the bill be amended by adding the following subsection:

"(2) Section 10 of the act is amended by adding the following subsection:

"Limitation, electronic reporting

"(3) Subsection (2) applies only to the extent that the physician, nurse, qualified pharmacist or prescribed person has the capacity to provide the information to the medical officer of health directly through an electronic reporting method used by all public health units."

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: Again, we're just recognizing the increased availability and participation in vaccinations of Ontarians through pharmacies and/or pharmacists and ensuring that they are receiving the same recognition. Since they already carry out the scope and task presently, I don't think they should be relegated to a "prescribed person."

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: Pharmacists are the health care professionals most likely to be added under "prescribed person." I think it would be respectful to put them in the bill right now. I'll be voting in favour.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment lost.

Shall schedule 1, section 4 carry? Carried.

We'll move to schedule 1, section 5, PC amendment number 10: Mr. Yurek?

Mr. Jeff Yurek: I move that subclause 12(2)(b)(i) of the act, as set out in section 5 of schedule 1 to the bill, be amended by adding "qualified pharmacist" after "nurse".

The Chair (Mr. Monte McNaughton): Any debate? All those in favour? Opposed? I declare that amendment lost.

Shall schedule 1, section 5 carry? Carried.

We'll move to schedule 1, section 6, NDP amendment number 10.1: Madame Gélinas?

M^{me} France Gélinas: I move that section 6 of schedule 1 to the bill be struck out.

The Chair (Mr. Monte McNaughton): Okay. The amendment's out of order. You should just be voting against the section.

M^{me} France Gélinas: Okay.

Mr. Monte McNaughton: Shall schedule 1, section 6 carry? Carried.

M^{me} France Gélinas: Actually, I wanted to vote against, not for, but it makes no difference; it carried.

The Chair (Mr. Monte McNaughton): Shall schedule 1, section 7 carry? Carried.

Shall schedule 1 carry? Carried.

We'll move to schedule 2, section 1, PC amendment number 11: Mr. Yurek.

Mr. Jeff Yurek: I move that the definition of "personal information" in subsection 1(4) of schedule 2 to the bill be amended by striking out "and personal

health information as defined in the Personal Health Information Protection Act, 2004”.

The Chair (Mr. Monte McNaughton): Debate? Madame Gélinas—sorry I saw your hand first.

Mr. Jeff Yurek: Go ahead.

M^{me} France Gélinas: I would say, when the Information and Privacy Commissioner came—I think it would be wise for us to listen so that we don’t end up with a bill that doesn’t stand up and is contested. This was a recommendation that came directly from the Information and Privacy Commissioner, and I think we should follow it.

The Chair (Mr. Monte McNaughton): Mr. Yurek?

Mr. Jeff Yurek: I totally agree. I think, again, when the privacy commissioner comes and takes the time to add amendments to a bill before the Legislature in order to prevent any unintended consequences, the committee should seriously take a look at those amendments and support them.

The Chair (Mr. Monte McNaughton): Further debate? Mr. Fraser.

Mr. John Fraser: We won’t be supporting the motion. This clause ensures that the ministry’s use, disclosure and collection of personal information and personal health information is consistent with the Freedom of Information and Protection of Privacy Act, and the Personal Health Information Protection Act, 2004, would not be included.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: How do you reconcile this with what the Information and Privacy Commissioner says on the record? I’ll quote:

“Amend the definition of ‘personal information’ ... to exclude personal health information as follows:...

“‘personal information’ means personal information as defined in the Freedom of Information and Protection of Privacy Act.”

The Information and Privacy Commissioner “is of the view that the ministry already has sufficient authority to collect, use and disclose personal health information.”

The Chair (Mr. Monte McNaughton): Further debate? Mr. Fraser.

Mr. John Fraser: The concerns of the Information and Privacy Commissioner: We addressed those under motions 15 and 17. Sorry, I should have mentioned that in my original response.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment lost.

We’ll move to NDP amendment 11.1: Madame Gélinas.

M^{me} France Gélinas: I move that the definition of “personal information” in section 5 of the Laboratory and Specimen Collection Centre Licensing Act, as set out in subsection 1(4) of schedule 2 to the bill, be amended by striking out “and personal health information as defined in the Personal Health Information Protection Act, 2004”.

The Chair (Mr. Monte McNaughton): Debate? Madame Gélinas.

M^{me} France Gélinas: This was my attempt, very similar to the PCs’, to meet the requirement that was set out quite clearly by the Information and Privacy Commissioner. I’m afraid that if we don’t follow the direction of the Information and Privacy Commissioner, we will end up with a bill that will be contested, and then this entire section will be in front of the courts, rather than being implemented.

The Chair (Mr. Monte McNaughton): Further debate? Mr. Fraser.

Mr. John Fraser: In relation to the last motion, we address this as well, those concerns, in motions 15 and 17 coming up, so we won’t be supporting it.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment lost.

We’ll move to PC amendment number 12: Mr. Yurek.

Mr. Jeff Yurek: I move that subsection 1(6) of schedule 2 to the bill be struck out.

The Chair (Mr. Monte McNaughton): Debate? Any debate? All those in favour—

M^{me} France Gélinas: Excuse me, Chair.

The Chair (Mr. Monte McNaughton): Oh, sorry. Madame Gélinas.

M^{me} France Gélinas: Basically, we heard from many deputants that there is a level of anxiety out there as to the definition of a “specimen collection centre.” For years and years, doctors’ offices, nurse practitioner-led clinics and community health centres have been collecting specimens, but have never been subject to the same level of accreditation as a lab.

When the labs were here, they told us that if they draw blood in a physician’s office, sure, they will have all of the oversight and accreditation. But if a physician or his delegate—or a nurse practitioner, community health centre, aboriginal health access centre or any primary care—decides to collect blood, then it should be made clear that they will not have to follow the same licensing as the labs do.

There’s a very high level of angst regarding this part of the bill. In my neck of the woods, where none of the private labs offer collection centres, we rely on physicians’ offices and we rely on nurse practitioner-led clinics to do the blood collection. Right now, we will lose access if we don’t take the time to make sure that this is clear.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: I want to assure you that clinicians will continue to be exempted from licensing under the regulation. They will not require licenses to perform tests. So we won’t be supporting this.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I never get it. If it’s going to come into regulation anyway, why don’t we just put it in the bill and be done with it for everybody to see?

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare the amendment lost.

We'll move to NDP amendment 12.1: Madame Gélinas.

1340

M^{me} France Gélinas: I'm psychic. I think I'm going to be ruled out of order.

Mr. Monte McNaughton: You're right. Yes, it is a duplicate. You are ruled out of order.

Shall schedule 2, section 1 carry? Carried.

For administrative purposes, we're going to move to NDP amendment 14.1, just to bring that to everybody's attention. Madame Gélinas.

M^{me} France Gélinas: I move that schedule 2 to the bill be amended by adding the following section:

"1.1 The act is amended by adding the following section:

"Commissioner

"7(1) The minister shall appoint a commissioner of laboratory services and specimen collection services for the purposes of overseeing the director appointed under section 6 and performing the following duties:

"1. Ensuring that every Ontarian has reasonable access to medically necessary laboratory services and specimen collection services and ensuring the quality of those services.

"2. Making recommendations to the minister based on global developments in the laboratory services and specimen collection services sectors.

"Tabling report

"(2) The commissioner shall table a report in the Legislative Assembly on an annual basis, providing an evaluation of the effectiveness of laboratory services and specimen collections services offered in Ontario.

"Other reports

"(3) The commissioner may publish such other reports relating to laboratory services and specimen collection services as the commissioner considers appropriate."

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: I was going to give my voice a break, but basically what this does is that—there is a lot of money being spent on lab services in Ontario and there are a lot of people who depend on lab services to get a diagnosis, to start treatment or to modify a plan of care. This is something that is very important. I think it would be worth having a commissioner to look over, what are the trends? How are we doing? How are we doing for access?

Right now, the way we have it, if a lab wants to open a new collection centre, they need the permission of the minister, but if a lab wants to close a collection centre, they can do this without telling anyone.

I represent people in northeastern Ontario. I have lost all of the collection centres that were in my riding. The people of Nickel Belt now have to travel long distances

to 111 Larch Street in downtown Sudbury to be able to gain access to a community lab.

I know that I'm not the only one where things have changed dramatically. Having a commissioner giving us reports as to what the trends are, how we are doing and if we do maintain access, as well as looking at what sort of tests should be included or not, would be a prudent thing to have in Ontario.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment lost.

We move to schedule 2, section 2, NDP amendment 14.2. Madame Gélinas.

M^{me} France Gélinas: I move that subsection 9(7) of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 2 of schedule 2 to the bill, be struck out.

The Chair (Mr. Monte McNaughton): Debate? Madame Gélinas. No? No debate? Any debate? All those in favour? Opposed? I declare that amendment lost.

Shall schedule 2, section 2 carry? Carried.

Shall schedule 2, section 3 carry? Carried.

Shall schedule 2, section 4 carry? Carried.

Now we're going to move to schedule 2, section 5, and we're going to government amendment number 13. Mr. Fraser.

Mr. John Fraser: I move that schedule 2, section 5 of the bill, subsection 18(2.1) of the—oh, sorry. I got it wrong.

The Chair (Mr. Monte McNaughton): It's number 16, right?

Mr. John Fraser: Number 16?

The Chair (Mr. Monte McNaughton): Subsection 16.

Mr. John Fraser: Subsection—sorry. Yes.

I move that section 16 of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 5 of schedule 2 to the bill, be amended by adding the following subsection:

"Director is an inspector

"(2.1) The director is an inspector by virtue of office, and when acting as an inspector shall, on request, produce evidence of being appointed as director instead of the certificate of appointment required under subsection (2)."

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas?

M^{me} France Gélinas: I have no idea what this means.

The Chair (Mr. Monte McNaughton): Mr. Fraser?

Mr. John Fraser: What it simply means is that the director, by virtue of office, is an inspector, and does not have to be appointed as an inspector to conduct an investigation.

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas?

M^{me} France Gélinas: So "on request, produce evidence of being appointed as director"—if he hasn't been—"instead of the certificate of appointment required under subsection (2)."

The Chair (Mr. Monte McNaughton): Further debate?

Interjection.

M^{me} France G  linas: I don't know what that means.

Mr. John Fraser: Section 6 of the Laboratory and Specimen Collection Centre Licensing Act requires the ministry to appoint an officer of the Ministry of Health and Long-Term Care to be the director of laboratory and specimen collection centre licensing. The powers of the director, under the act, all come from statute.

In certain circumstances, it may be necessary for the director, under the act, to go on-site at a laboratory to inspect and review a situation himself or herself. The motion provides transparency. In the event that the director goes on-site at a laboratory, it clearly identifies to an owner or operator of a laboratory or specimen collection centre that the director can also be an inspector.

This type of provision is common for other regulatory statutes—for example, some of the provisions found in the Child Care and Early Years Act, the Long-Term Care Homes Act, 2007, and the Retirement Homes Act, 2010.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that motion carried.

We move to government amendment number 14. Mr. Fraser?

Mr. John Fraser: I move that clause 16(3)(c) of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 5 of schedule 2 to the bill, be struck out and the following substituted:

“(c) any place that the director reasonably believes is being operated as a laboratory facility without a licence.”

The Chair (Mr. Monte McNaughton): Any debate? Madame G  linas?

M^{me} France G  linas: Yes, this will send shivers down the spine of any physician, nurse practitioner or community health centre who acts as a collection site for drawing blood in their community. Are you making this on purpose, or am I missing something here?

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser?

Mr. John Fraser: The intent is to ensure, if someone is operating illegally, that the director can do their work.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment carried.

We move to government amendment number 15. Mr. Fraser?

Mr. John Fraser: I move that section 16 of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 5 of schedule 2 to the bill, be amended by adding the following subsection:

“Personal information in records

“(13) For greater certainty, a reference to a record in this section includes a record that contains personal information.”

The Chair (Mr. Monte McNaughton): Any debate? Madame G  linas?

M^{me} France G  linas: This is what is supposed to reassure the Information and Privacy Commissioner that no personal information will be shared with the ministry?

The Chair (Mr. Monte McNaughton): Further debate?

M^{me} France G  linas: I think it's coming.

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Mr. John Fraser: The provision is needed to make it transparent that inspectors may encounter personal information and personal health information when dealing with records on inspection. The amendment responds to a concern of the Information and Privacy Commissioner that schedule 2 did not specify records could contain personal information and personal health information.

The Chair (Mr. Monte McNaughton): Further debate? Madame G  linas.

M^{me} France G  linas: Well, the Information and Privacy Commissioner also said it is their view that the ministry already has sufficient authority to collect, use and disclose personal information, and we should not be adding to those powers.

The Chair (Mr. Monte McNaughton): Further debate? Seeing none, all those in favour? Opposed? I declare that amendment carried.

Shall schedule 2, section 5, as amended, carry? Carried.

We'll move to schedule 2, section 6, NDP amendment 15.1. Madame G  linas.

M^{me} France G  linas: I move that section 17.1 of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 6 of schedule 2 to the bill, be struck out and the following substituted:

“Personal information

“17.1 The ministry may indirectly collect personal information and may use and disclose that information for the purpose of processing and issuing a license under this act, subject to any requirements or conditions provided for in the regulations.”

The Chair (Mr. Monte McNaughton): Debate? Madame G  linas.

M^{me} France G  linas: I think that brings it closer to what the Information and Privacy Commissioner asked us to do.

The Chair (Mr. Monte McNaughton): Further debate?

Mr. John Fraser: Chair, this provision is needed to make it transparent that inspectors may encounter personal information and personal health information when dealing with records. This amendment responds to the concern of the privacy commissioner that schedule 2 did not specify records could contain personal information and personal health information.

The Chair (Mr. Monte McNaughton): Mr. Yurek?

Mr. Jeff Yurek: Going along with support of the NDP motion with regard to the privacy commissioner stating there's no justification for granting the ministry new authority to use, disclose or collect personal health information, we've been on record as a party that this

government has crept too far into obtaining personal health information of all Ontarians. It has to stop.

The Chair (Mr. Monte McNaughton): Further debate, Madame Gélinas? No? Further debate? All in favour? Opposed? I declare that motion lost.

We'll move now to PC amendment 16.

Mr. Jeff Yurek: I imagine it will be ruled out of order, since it's the same as the previous amendment.

The Chair (Mr. Monte McNaughton): It's a duplicate. Yes, it's ruled out of order.

We'll move to government amendment number 17 and Mr. Fraser.

Mr. John Fraser: I move that section 17.1 of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 6 of schedule 2 to the bill, be amended by adding the following subsection:

"Personal health information not to be used for administration

"(4) Despite the definition of 'personal information' in section 5, 'personal information' for purposes related to the administration of this act does not include personal health information as defined in the Personal Health Information Protection Act, 2004."

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: Chair, this amendment would make it clear that the ministry would not collect, use or disclose personal health information when dealing with matters related to the administration of the act, such as processing licensing applications.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment carried.

Shall schedule 2, section 6, as amended, carry? Carried.

We're on to schedule 2, section 7, government amendment number 18. Mr. Fraser.

Mr. John Fraser: I move that subsection 18(2) of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 7 of schedule 2 to the bill, be amended by adding the following clause:

"(s.1) requiring an agency designated under clause (s) to submit reports to the director, and governing the contents of those reports;"

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser?

Mr. John Fraser: This amendment would add regulation-making power that would allow for a regulation to require an agency designated to carry out the quality management program to provide reports to the director. The regulation would also address the contents of those reports.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? Carried.

Shall schedule 2, section 7, as amended, carry? Carried.

Shall schedule 2, section 8 carry? Carried.

We'll move to schedule 2, section 9: government amendment 19. Mr. Fraser?

Mr. John Fraser: I move that subsection 22(3) of the Laboratory and Specimen Collection Centre Licensing Act, as set out in section 9 of schedule 2 to the bill, be struck out and the following substituted:

"Directors, officers, etc.

"(3) Whether or not a corporation has been convicted of an offence under subsection (1), each director, officer, employee or agent of the corporation who authorized, permitted, acquiesced in or participated in the commission of an offence by the corporation under subsection (1) or failed to take reasonable care to prevent the corporation from committing an offence under subsection (1) is a party to and guilty of the offence, and on conviction is liable to the punishment provided for under subsection (1)."

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser?

Mr. John Fraser: Generally, the proposed amendment is necessary to modernize the language in relation to director liability so that the language is consistent with other regulatory statutes. The proposed amendment in this motion does not change the substance of the provision in the bill.

This amendment to the current text of the bill would properly tie subsection 22(3) to the current 22(1). This provision allows a director, officer, employee or agent of the corporation to be convicted of an offence under the laboratory act.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas?

M^{me} France Gélinas: I like the direction where this is going. I'm just not sure—and I would have counsel, again, advise me—if we cover director, officer, employee or agent of the corporation, do you think that we have them all? Could there be other titles of people who authorized, permitted etc., or is this pretty standard?

Mr. Ralph Armstrong: I would call this fairly standard legislation, ma'am. My corporate law days were back when my hair was dark, but I would call this standard legislation, which are provisions of this type.

M^{me} France Gélinas: Thank you.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment carried.

Shall schedule 2, section 9, as amended, carry? Carried.

Okay, we'll bundle the next ones. We'll do schedule 2, sections 10 to 15, inclusive. Shall schedule 2, sections 10 to 15, carry? Carried.

Shall schedule 2, as amended, carry? Carried.

Okay, we're on to schedule 3, PC amendment number 20. Mr. Yurek?

Mr. Jeff Yurek: I move that section 1 of schedule 3 to the bill be amended by adding the following subsection:

"(0.1) Subsection 1(1) of the Ontario Drug Benefit Act is amended by adding the following definition:

""qualified pharmacist" means a member of the Ontario College of Pharmacists who is authorized under the Pharmacy Act, 1991 to prescribe drugs;"

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas?

M^{me} France Gélinas: The Ontario Drug Benefit Act does not get debated very often. It would be a good opportunity to put pharmacists into the bill. I will be supporting this amendment.

1400

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that motion lost.

We'll move to government amendment number 21. Mr. Fraser.

Mr. John Fraser: I move that section 1 of schedule 3 to the bill be struck out and the following substituted:

"1. Subsection 1(1) of the Ontario Drug Benefit Act is amended by adding the following definitions:

""authorized prescriber" means a physician, registered nurse in the extended class, a prescribed person or a member of a prescribed class; ("prescripteur autorisé")

""registered nurse in the extended class" means a registered nurse who holds an extended certificate of registration under the Nursing Act, 1991; ("infirmière autorisée ou infirmier autorisé de la catégorie supérieure")"

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: The proposed motion would add the definition of "authorized prescriber" to the Ontario Drug Benefit Act. "Authorized prescriber" would be identified as a physician, registered nurse in the extended class—for example, nurse practitioner—and, in future, any other person or member of a class of persons prescribed by regulation.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I don't reconcile what's written there with what he just said. We've just defined authorized prescribers as physicians and nurses in the extended class. "A prescribed person or a member of a prescribed class": Is this what you mean by, in regulation, you would define a prescribed person as a pharmacist?

The Chair (Mr. Monte McNaughton): Mr. Fraser.

Mr. John Fraser: As authorized by regulation, yes. That's the intent of that. It allows for further expansion of the people who are allowed to do that through regulation—practitioners who are allowed to do that.

M^{me} France Gélinas: I want to make absolutely sure on the record that the new definition of authorized prescriber could include RNs, because there is lots of talk about RNs prescribing. I would say that the Minister of Health, at the last RNAO AGM, pretty well said that RN prescribing will be coming. As well, the other health professionals most likely to start to prescribe would be pharmacists.

"A prescribed person or a member of a prescribed class": If we have this, does that mean that in regulation, you can have RNs and pharmacists?

Mr. John Fraser: Yes.

M^{me} France Gélinas: Okay.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment carried.

Shall schedule 3, section 1, as amended, carry? Carried.

Shall schedule 3, section 2 carry? Carried.

We'll move to schedule 3, section 3, PC amendment number 22. Mr. Yurek.

Mr. Jeff Yurek: I move that section 3 of schedule 3 to the bill be struck out and the following substituted:

"3. Subsections 9(1) and (2) of the act are amended by striking out 'physician' wherever it appears and substituting in each case 'physician, qualified pharmacist or registered nurse in the extended class'."

The Chair (Mr. Monte McNaughton): Debate? Any debate? Madame Gélinas.

M^{me} France Gélinas: I think it makes things clearer when you name people, and I would prefer that we do name pharmacists.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare the amendment lost.

We move to NDP amendment 22.1. Madame Gélinas.

M^{me} France Gélinas: I move that section 3 of schedule 3 to the bill be struck out and the following substituted:

"3. Subsections 9(1) and (2) of the act are amended by striking out 'physician' wherever it appears and substituting in each case 'physician or registered nurse'."

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: We all know that RN prescribing is coming. The Minister of Health is on the record saying that RN prescribing is coming. I think it would be wise in those sections—subsections 9(1) and (2)—to make it clear that RN prescribing is coming.

The Chair (Mr. Monte McNaughton): Mr. Yurek.

Mr. Jeff Yurek: We are supportive of this amendment as well. I think it makes sense to list out those professions that will be participating now or in the next few months with prescribing. It's unfortunate that the government doesn't see that with pharmacists, but hopefully, maybe, with registered nurses, they'll be accepting.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: The objective of this proposed motion will be achieved by similar government motions. The government motions, if passed, will provide a more flexible and comprehensive solution than the proposed motion to address outdated references in the Ontario Drug Benefit Act that limit the ministry's ability to fund certain products when prescribed or requested by non-physician prescribers.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare the amendment lost.

We'll move to government amendment number 23: Mr. Fraser.

Mr. John Fraser: I move that section 3 of schedule 3 to the bill be struck out and the following substituted:

"3. Subsections 9(1) and (2) of the act are amended by striking out 'a physician' wherever it appears and substituting in each case 'an authorized prescriber'."

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: The proposed motion would authorize the Ministry of Health and Long-Term Care to fund non-drug therapeutic substances listed in the formulary—things like blood glucose test strips and nutritional products—when they are prescribed by non-physician prescribers such as nurse practitioners and other prescribers who may be specified in regulation in the future.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment carried.

Shall schedule 3, section 3, as amended, carry? Carried.

We'll move to schedule 3, section 4 and PC amendment number 24: Mr. Yurek.

Mr. Jeff Yurek: I move that section 4 of schedule 3 to the bill be struck out and the following substituted:

"4. Subsections 16(1), (3) and (4) of the act are repealed and the following substituted:

"Unlisted drugs, special case

"(1) If a physician, qualified pharmacist or registered nurse in the extended class informs the executive officer that the proper treatment of a patient who is an eligible person requires the administration of a drug for which there is not a listed drug product, the executive officer may make this act apply in respect of the supplying of that drug as if it were a listed drug product by so notifying the physician, qualified pharmacist or registered nurse in the extended class.

"Listed drugs, special case

"(3) If a physician, qualified pharmacist or registered nurse in the extended class informs the executive officer that the proper treatment of a patient who is an eligible person requires the administration of a drug for which there are one or more listed drug products but for which the conditions for payment under section 23 are not satisfied, the executive officer may make this act apply in respect of the supplying of those listed drug products as if the conditions were satisfied.

"Notice to operator

"(4) An operator of a pharmacy is not liable for contravening this act or the regulations in respect of supplying a drug referred to in subsection (1) or a listed drug product referred to in subsection (3) unless the operator has received notice from the physician, qualified pharmacist or registered nurse in the extended class or from the executive officer that this act applies to that supplying."

The Chair (Mr. Monte McNaughton): Any debate on this amendment? Any debate? All those in favour? Opposed? I declare that amendment lost.

We'll move to government amendment number 25: Mr. Fraser.

Mr. John Fraser: I move that section 4 of schedule 3 to the bill be struck out and the following substituted:

"4. Subsections 16(1), (3) and (4) of the act are repealed and the following substituted:

"Unlisted drugs, special case

"(1) If an authorized prescriber informs the executive officer that the proper treatment of a patient who is an eligible person requires the administration of a drug for which there is not a listed drug product, the executive officer may make this act apply in respect of the supplying of that drug as if it were a listed drug product by so notifying the prescriber.

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"Listed drugs, special case

"(3) If an authorized prescriber informs the executive officer that the proper treatment of a patient who is an eligible person requires the administration of a drug for which there are one or more listed drug products but for which the conditions for payment under section 23 are not satisfied, the executive officer may make this act apply in respect of the supplying of those listed drug products as if the conditions were satisfied.

"Notice to operator

"(4) An operator of a pharmacy is not liable for contravening this act or the regulations in respect of supplying a drug referred to in subsection (1) or a listed drug product referred to in subsection (3) unless the operator has received notice from the authorized prescriber or from the executive officer that this act applies to that supplying."

The Chair (Mr. Monte McNaughton): Debate?

Mr. John Fraser: The proposed motion would authorize the Ministry of Health and Long-Term Care to consider patient-specific funding requests submitted to the Exceptional Access Program by non-physician prescribers, such as nurse practitioners and other prescribers who may be specified in regulation in the future.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: So this is the exact same motion that was presented by the Progressive Conservatives, but we change "physician, nurse practitioners in the extended class, pharmacist" to "authorized prescriber"?

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I would say that it's high time that we give nurse practitioners access to the special case. I will be supporting this motion.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? Carried.

Shall schedule 3, section 4, as amended, carry? Carried.

We'll move to schedule 3, section 5, government amendment number 26: Mr. Fraser.

Mr. John Fraser: I move that section 5 of schedule 3 to the bill be struck out and the following substituted:

"5(1) Section 18 of the act is amended by adding the following subsection:

"Authorized prescribers

The Chair (Mr. Monte McNaughton): Yes, 26.3. Schedule 4, section 3—

M^{me} France G  linas: Okay, so section 2 has been erased?

The Chair (Mr. Monte McNaughton): Yes, defeated. Those are just notices for members, so we're on 26.3.

M^{me} France G  linas: Sorry.

The Chair (Mr. Monte McNaughton): Any further debate on 26.3? Mr. Fraser?

Mr. John Fraser: No, I just wanted to make sure—France, you're good with it?

M^{me} France G  linas: Yes, I'm back on. Sorry.

The Chair (Mr. Monte McNaughton): Okay, all those in favour? Opposed? I declare it carried.

We'll move to NDP amendment 26.4. Madame G  linas?

M^{me} France G  linas: I move that clause 36(1)(d) of the Regulated Health Professions Act, 1991, as set out in subsection 3(2) of schedule 4 to the bill, be amended by striking out "Long-Term Care Homes Act, 2007" and substituting "Long-Term Care Homes Act, 2007, including for the purposes of a long-term-care home in respect of which an order has been made to revoke a licence under section 157 of that act".

The Chair (Mr. Monte McNaughton): Any debate? Madame G  linas?

M^{me} France G  linas: The way the bill is right now, if they are no longer a long-term-care home, the act would not apply, just because they lost their licence. I want the act to continue to apply even if they lose their licence, for all sorts of reasons. We have a couple of cases right now where the licences have been suspended, but they should still be covered by the act.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare the motion lost.

We'll move to government amendment 26.5 and Mr. Fraser.

Mr. John Fraser: I move that clause 36(1)(d) of the Regulated Health Professions Act, 1991, as set out in subsection 3(2) of schedule 4 to the bill, be amended by adding "the Retirement Homes Act, 2010" after "Long-Term Care Homes Act, 2007".

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser?

Mr. John Fraser: The motion builds upon the proposed amendment in Bill 87 which would allow colleges to disclose information to persons outside of the college—for example, the ministry and long-term-care homes, as may be required for the administration of the Long-Term Care Homes Act—by proposing a further amendment to allow colleges to similarly share information, where required, for the administration of the Retirement Homes Act, 2010. The motion would allow for improved sharing of relevant information by health regulatory colleges, thus improving communication and co-ordination between regulatory authorities and the health system.

The Chair (Mr. Monte McNaughton): Any further debate? Madame G  linas?

M^{me} France G  linas: Although I support the adding of the Retirement Homes Act, I still think that we will be missing a whole bunch of them. There are a number of interim licences out there.

There are a number of homes that have their licences suspended. The minute you are not a long-term-care home anymore because you've lost your licence, then you cannot share information. I am not psychic or anything, but if a home loses their licence, there's a chance that things are not going that well in that home. They would not have a licence anymore; therefore, the bill would not apply anymore.

1430

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour—

M^{me} France G  linas: Maybe just—

The Chair (Mr. Monte McNaughton): Ms. G  linas.

M^{me} France G  linas: I would ask legislative counsel, am I right in the way that I interpret this?

Mr. Ralph Armstrong: May I take the liberty of asking ministry counsel? They've probably formed an opinion on this.

Mr. John Fraser: That's fine, yes.

The Chair (Mr. Monte McNaughton): Good afternoon.

Mr. Taylor Ransom: Good afternoon.

The Chair (Mr. Monte McNaughton): If you would please just state your name for Hansard, and then answer the question.

Mr. Taylor Ransom: Taylor Ransom. I'm legal counsel with the Ministry of Health and Long-Term Care.

The amendment would amend section 36(1)(d) of the RHPA to include both the Retirement Homes Act and the Long-Term Care Homes Act. The intention was to include both types because of the analogous issues with both. It was certainly our intention that administration of the act would be broadly interpreted to include, potentially, circumstances in which licensing action would be taken either against long-term-care homes or retirement homes.

M^{me} France G  linas: I support your intention, but I'm asking more for a legal opinion. To have the intention that it covers a home that doesn't have a licence anymore—it's not a home; it's not covered by the act. They make it really clear when you have a problem with them that they are no longer a long-term-care home. It's what I've had the pleasure of dealing with in the past.

If they don't have a licence, they're not a long-term-care home. If they're not covered by the act, they're not covered by our bill either. It's not what your intentions are; it's what the bill says.

Mr. Taylor Ransom: I think the ministry's view would be that the bill would cover circumstances, as I say, where licensing action would be taken: for example, in the Long-Term Care Homes Act, where an interim manager would be in place following licensing action having been taken by the ministry.

M^{me} France Gélinas: What if the action is withdrawing the licence?

Mr. Taylor Ransom: It's my understanding, and certainly the ministry's view would be, that for administration of the act, it would be quite broad to encompass those types of circumstances.

M^{me} France Gélinas: Okay.

The Chair (Mr. Monte McNaughton): Great, thank you. Any further debate? All those in favour? Opposed? I declare the motion carried.

We move to PC amendment number 27. Mr. Yurek.

Mr. Jeff Yurek: I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

"(3) Subsection 36(1) of the act is amended by adding the following clause:

"(d.3) for research and public health purposes;"

The Chair (Mr. Monte McNaughton): Any debate? All those in favour? Opposed? I declare that motion lost.

We move to PC amendment number 28. Mr. Yurek.

Mr. Jeff Yurek: I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

"(3) Subsection 36(1.3) of the act is repealed and the following substituted:

"Limitation

"“(1.3) No person or member described in subsection (1) shall disclose, under clause (1)(e), any information with respect to a person other than a member, unless there are reasonable grounds to believe the non-member has engaged in conduct that could constitute an offence.”"

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: We're adding this to allow the college, upon investigation or any information that comes across them regarding non-members, to be able to share any information with possibly the police. I think this will go quite well with our opioid crisis and drug trafficking in this province.

Right now, the colleges cannot share information if, by chance, they found out that a patient was diverting drugs for their own particular use and/or benefit through sale of illegal narcotics. Right now, the colleges are banned from doing this. This would open up and allow the colleges to share that information they find with police so that investigations can go forward.

We are having an opioid crisis throughout this country. There are people dying every day. We need all the tools available that are possible. I don't know why we would block our colleges, which are fighting illegal activity going on, from sharing that with the appropriate authorities in order to decrease crimes and save lives.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I think it was CPSO, the College of Physicians and Surgeons, was doing an investigation of one of their members and while they were doing this, they realized that somebody else was hacking into

their electronic health system and producing prescriptions for opioids.

I think it would be safe to add this so that if something similar to this happens again, they are able to share information with the police and other authorities that could follow through.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that motion lost.

We'll move to NDP amendment number 29: Madame Gélinas.

M^{me} France Gélinas: I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

"(3) Subsection 36(1) of the act is amended by adding the following clause:

"“(h.1) for purposes relating to research or the improvement of public health, as long as all information that could be used to identify the specific individual is removed.”"

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: There is a wealth of information that our different health professions colleges already hold. There is opportunity to do research that would be very worthwhile for our health care system, for the health of Ontarians and for many other reasons. This should be allowed, but with very strict restrictions in law to never share information that can be identified, so that if a college doesn't have an opportunity to share their information without identifiers, then research would not be allowed.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment lost.

We'll move to PC amendment number 30: Mr. Yurek.

Mr. Jeff Yurek: Thank you, Chair. We're hoping for at least one amendment supported on our side.

I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

"(3) Section 36 of the act is amended by adding the following subsection:

"“Mental Health Act

"“(4) Subsection 35(9) of the Mental Health Act does not apply to any proceeding under this act or a health profession act.”"

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: This is just to ensure that doctors who are subject to proceedings will be able to invoke a patient's privacy rights to shield their misconduct. This is to ensure that this doesn't happen during the situation going on, or proceedings.

The Chair (Mr. Monte McNaughton): Madame Gélinas.

M^{me} France Gélinas: The 300,000 Ontarians or so that are regulated by one of our professional health colleges are like everybody else: One in 10 will suffer a mental illness, and in some professions it's actually

higher. Discrimination against people with mental illness is still alive and well in Ontario. That would be a way to give them a bit of protection if the Mental Health Act was to not apply to any proceedings under this act or the health professions act.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that motion lost.

We move to government amendment number 31: Mr. Fraser.

Mr. John Fraser: I move that section 3 of schedule 4 to the bill be amended by adding the following subsections:

“(3) Subsection 36(1) of the act is amended by striking out ‘or’ at the end of clause (i), by adding ‘or’ at the end of clause (j) and by adding the following clause:

“(k) to the minister in order to allow the minister to determine,

“(i) whether the college is fulfilling its duties and carrying out its objects under this act, a health profession act, the Drug and Pharmacies Regulation Act or the Drug Interchangeability and Dispensing Fee Act, or

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“(ii) whether the minister should exercise any power of the minister under this act, or any act mentioned in subclause (i).”

“(4) Section 36 of the act is amended by adding the following subsection:

“Restriction

“(1.6) Information disclosed to the minister under clause (1)(k) shall only be used or disclosed for the purpose for which it was provided to the minister or for a consistent purpose.”

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: The motion would amend the confidentiality provisions of the RHPA to allow colleges to share information with the minister in order to allow the minister to determine whether the colleges are fulfilling their statutory duties appropriately and/or whether the minister should exercise any of the minister's powers under the statutory scheme.

Permitting sharing of such information with the minister is intended to help ensure greater levels of accountability within the health regulatory sector and is intended to permit the minister to respond more swiftly to situations involving the operations of health regulatory colleges. The sharing of this information is also intended to support the minister's overall responsibility under the statutory scheme for ensuring that colleges are regulated appropriately in the public interest.

Of note, the motion would also clarify that the minister may only use or disclose such information for the purposes set out in section 36(1)(k) for a purpose that is consistent with the reason for which it was provided to the minister.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I cannot for the life of me think that we cannot find another way to make sure that colleges do their work properly without creating this peephole into people's personal information. I don't know why we are not putting more time, effort and energy into finding ways to hold colleges to account without having colleges disclose personal information and personal health information. There are some really brilliant people working at the Ministry of Health; I'm sure they can find a way to get that done.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? Carried.

We'll move to NDP motion number 32. Madame Gélinas.

M^{me} France Gélinas: I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

“(4) Subsection 36(1.3) of the act is amended by adding ‘unless there are reasonable grounds to believe the non-member has engaged in conduct that could constitute an offence’ at the end.”

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: It's very much similar to an amendment that the PCs had tried to put forward that would give colleges the right to share information about non-members. When they go into a practice, when they investigate one of their members, they often come across the work of other people working in the same area—the same clinic, same centre—and they sometimes come across illegal activities that are going on. This would give the colleges the opportunity, if they believe that there is action taking place that could constitute an offence, it would give them the opportunity to share information about non-members.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Yurek.

Mr. Jeff Yurek: Yes, we're supportive of this amendment. I find it outrageous: The government continues to give themselves access to the personal health information of all Ontarians, but those who could possibly be participating in illicit activity are given protection. Not allowing the colleges to disclose that information to authorities—we're in the middle of an opioid crisis in this country; people are dying on the streets. Authorities—the health officials, legal, justice—need every tool available in order to stem the death that is going on in our country. For a government to be wanting to invade the privacy of Ontarians, but protecting criminal activity—it's shocking.

I am fully supportive. Hopefully, they'll listen to this amendment and help stem the flow of drug trafficking in this country.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I want to make this clear: There are cases where people are hacking into physicians' electronic health records and printing illegal prescriptions for narcotics, for opioids and for other addictive pain-

killers. Colleges may find out about this and not be allowed to tell anyone if we don't pass this amendment. This is absurd.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: We don't want to discourage the co-operation of witnesses and complainants, as they may be less willing to come forward to the college with evidence. If these individuals do not come forward, it may negatively impact the college's ability to fully investigate matters involving a member's professional misconduct, incompetence or incapacity.

The proposal also conflicts with the advice that we received from the sexual abuse task force, and from victim and patient advocacy groups, that the disclosure to police of incidents of sexual assault is a decision that complainants alone should make.

The Chair (Mr. Monte McNaughton): Any further debate?

Mr. Jeff Yurek: This is a request from the colleges to help them in stemming the tide of narcotic trafficking that is ongoing in this country.

The Chair (Mr. Monte McNaughton): Madame Gélinas?

M^{me} France Gélinas: I agree with what was just said. I also give the colleges enough respect that they would never treat a victim of sexual abuse and go to the police if they didn't want them to. This is to give them permission to go to the police if there is something unlawful going on. By voting down that amendment, you allow this to continue.

You also send a very clear message to the—remember, I have 110 opiate prescriptions per 100 residents in northeastern Ontario. Not all of those prescriptions are given by physicians. Some of them are given by people hacking into physicians' health records. This will continue. The damage that it is doing to the people of the northeast will also continue.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? I declare that amendment lost.

We'll move to NDP motion number 33.

M^{me} France Gélinas: I move that section 3 of schedule 4 to the bill be amended by adding the following subsection:

“(5) Section 36 of the act is amended by adding the following subsection:

“Non-application of Mental Health Act

“(4) Subsection 35(9) of the Mental Health Act does not apply to any proceeding under this act or a health profession act.”

The Chair (Mr. Monte McNaughton): Any debate?

M^{me} France Gélinas: A very similar motion put forward by the PCs was debated; the same arguments hold.

The Chair (Mr. Monte McNaughton): Any further debate? All those in favour? Opposed? Lost.

Shall schedule 4, section 3, as amended, carry? Carried.

I believe we have consensus amongst the committee to take a break for a few minutes. I'm going to ask all committee members to be back here at 2:59, because when we go back in session at 3, we'll be moving quickly through these. So about a five-minute break—

Interjection.

The Chair (Mr. Monte McNaughton): I'm sorry. Mr. Fraser?

Mr. John Fraser: We would like to go for a 20-minute break.

The Chair (Mr. Monte McNaughton): Is there agreement?

M^{me} France Gélinas: Does it change anything?

The Chair (Mr. Monte McNaughton): No.

Mr. John Fraser: If you want to go through a bit more debate until, like, 2:55, we can do that too. We're willing to debate right up to 2:59.

The Chair (Mr. Monte McNaughton): Okay. It's the will of the committee.

Mr. John Fraser: Yes.

The Chair (Mr. Monte McNaughton): So do you want to go up to 2:59 and then take the 20-minute recess?

Mr. John Fraser: Does that work for everybody? Okay, let's keep going.

The Chair (Mr. Monte McNaughton): Sure. We'll move to schedule 4, section 4: NDP amendment number 34.

M^{me} France Gélinas: I move that subsection 36.1(5) of the Regulated Health Professions Act, 1991, as set out in subsection 4(2) of schedule 4 to the bill, be amended by striking out paragraphs 2, 3 and 5 and substituting the following:

“2. The minister shall not collect personal information under subsection (1).

“3. Reports and other documents using information collected under this section may be published for the purposes set out under subsection (1) and for those purposes only.”

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The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: I was not successful in getting rid of the peephole. I am trying to minimize what can be done with the personal information and personal health information of members of the different professional health colleges in Ontario.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare the motion lost.

Shall schedule 4, section 4 carry? Carried.

Shall schedule 4, section 5 carry? Carried.

We'll move to schedule 4, section 6, and NDP amendment number 35: Madame Gélinas.

M^{me} France Gélinas: I move that subsection 6(1) of schedule 4 to the bill be struck out.

The Chair (Mr. Monte McNaughton): Any debate? Madame Gélinas.

M^{me} France Gélinas: Basically, what this does is it allows the minister to prescribe additional functions to

the patient relations program for the purpose of this bill. By striking it out, we leave this responsibility to the colleges.

The Chair (Mr. Monte McNaughton): Any further debate? Mr. Fraser.

Mr. John Fraser: We won't be supporting this motion because it wouldn't allow the ministry access to information necessary for the purposes of health human resources planning.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment lost.

We'll move to PC amendment number 36: Mr. Yurek.

Mr. Jeff Yurek: I move that subsection 6(2) of schedule 4 to the bill be struck out.

The Chair (Mr. Monte McNaughton): Any debate? Mr. Yurek.

Mr. Jeff Yurek: Sure. This is dealing with the composition of committees to ensure complete separation between the discipline committee and the council, to ensure there's no overlap of membership and there are both public and professional members included on the board. It's an ask from the CPSO in order to ensure greater flexibility in the college and also ensuring that non-council members are going to be on the discipline committee.

The Chair (Mr. Monte McNaughton): Further debate? Madame Gélinas.

M^{me} France Gélinas: I thought that this section dealt with the definition of "patient."

The Chair (Mr. Monte McNaughton): Further debate?

M^{me} France Gélinas: Can I ask legislative counsel to see? Does this deal with the definition of "patient" or does this deal with what he's just talked about?

Mr. Ralph Armstrong: Subsection 6(1), which we already had the motion fail on, dealt with the definition of "patient." We're on 6(2), which is about committees.

M^{me} France Gélinas: Okay. I'm not feeling too good, as you can see. I'm good now. I know where we are. Thank you.

The Chair (Mr. Monte McNaughton): Further debate? All those in favour? Opposed? I declare that amendment lost.

We move to NDP amendment number 37: Madame Gélinas.

M^{me} France Gélinas: I move that subsection 6(2) of schedule 4 to the bill be struck out.

The Chair (Mr. Monte McNaughton): This is a duplicate, so it's out of order.

We'll move to government amendment number 38: Mr. Fraser.

Mr. John Fraser: I move that clause 43(1)(t) of the Regulated Health Professions Act, 1991, as set out in subsection 6(3) of schedule 4 to the bill, be struck out and the following substituted:

"(t) prescribing additional information to be contained in a college's register for the purposes of paragraph 19 of subsection 23(2) of the code and designating such

information as information subject to subsection 23(13.1) of the code."

The Chair (Mr. Monte McNaughton): Any debate? Mr. Fraser.

Mr. John Fraser: The proposed motion maintains the minister's regulation-making authority to specify additional information that must be contained in the colleges' public registers.

In addition, the motion clarifies that the regulation would also specify whether the additional information to be contained in the register would also be subject to the registrar's duty to correct incomplete and inaccurate information.

While it is inherently the role of colleges to ensure that information provided to the public is accurate and complete, the requirements to ensure complete and accurate information is particularly necessary where the register contains information obtained from third parties; i.e. information not generated by the college itself. This change would better enable members to ensure the accuracy of such third-party information in their register.

The Chair (Mr. Monte McNaughton): Any further debate? Madame Gélinas.

M^{me} France Gélinas: I was also under the impression that, sometimes, the information will never be complete; that is, you have a part of something, and then the information would not become available or accessible whatsoever because the information is not complete. Wouldn't it be wiser to give a little bit of leeway, that some information should be posted—although it is not complete—because it is still of value?

Mr. John Fraser: This motion is in keeping with the changes proposed in a complementary motion, which specifies that the college's duty to correct incomplete and inaccurate information applies to the information generated by a third party.

M^{me} France Gélinas: Yes, that's what you said the first time.

Mr. John Fraser: Yes.

The Chair (Mr. Monte McNaughton): Madame Gélinas.

M^{me} France Gélinas: But can you see where there is a problem? Because health professionals will argue that, given that the information is not complete, it should not be put on. But some information will never be complete; therefore, it will never get on.

The Chair (Mr. Monte McNaughton): Any further debate? Seeing none, all those in favour? Opposed? I declare the motion carried.

We're going to take a 20-minute recess now, and we will return at 3:17 p.m.

The committee recessed from 1457 to 1517.

The Chair (Mr. Monte McNaughton): Welcome back. Now that it's past 3 p.m., those amendments which have not yet been moved shall be deemed to have been moved, and the Chair shall interrupt the proceedings—as we've done—and shall, without further debate or amendment, put every question necessary to dispose of all remaining sections of the bill and any amendments thereto,

with one 20-minute waiting period pursuant to standing order 129(a) being permitted.

We will be recessing in about 25 minutes to go up to the House for the vote. We'll begin now and do that for the next 25 minutes.

We're on schedule 4, section 6, NDP amendment 38.1: All in favour? Opposed? I declare that lost.

Government amendment 39: All in favour? Opposed? I declare that amendment carried.

Shall schedule 4, section 6, as amended, carry? Carried.

We'll move to schedule 4, section 7, NDP amendment number 40: All in favour? Opposed? I declare that amendment lost.

Government amendment 41: All in favour? Opposed? I declare it carried.

PC amendment 42: All in favour? Opposed? I declare that amendment lost.

NDP amendment 43: All in favour? Opposed? I declare that amendment lost.

Shall schedule 4, section 7, as amended, carry? Carried.

Shall schedule 4, section 8 carry? Carried.

Schedule 4, section 9, NDP amendment number 44: All in favour? Opposed? I declare that amendment lost.

Government amendment 45: All in favour? Opposed? I declare that amendment carried.

NDP amendment 46: All in favour? Opposed? I declare it lost.

Shall schedule 4, section 9, as amended, carry? Carried.

Schedule 4, section 10, PC amendment number 47: All in favour? Opposed? I declare that amendment lost.

Shall schedule 4, section 10 carry? Carried.

Shall schedule 4, section 11 carry? Carried.

We'll move to schedule 4, section 12, NDP amendment number 48: All in favour? Opposed? I declare that lost.

PC amendment 49: All in favour? Opposed? I declare that lost.

NDP amendment 50: All in favour? Opposed? I declare that amendment lost.

NDP amendment number 51: All in favour? Opposed? I declare that lost.

NDP amendment 52: All in favour? Opposed? I declare that amendment lost.

Government amendment 53: All in favour? Opposed? I declare that carried.

PC amendment 54: All in favour? Opposed? Lost.

NDP amendment 55: All in favour? Opposed? Lost.

NDP amendment 56: All in favour? Opposed? Lost.

Government amendment 57: All in favour? Opposed? Carried.

PC amendment 58: All in favour? Opposed? Lost.

NDP amendment 59: All in favour? Opposed? Lost.

PC amendment 60: All in favour? Opposed? Lost.

Government amendment number 61: All in favour? Opposed? Carried

PC amendment number 62: All in favour? Opposed? Lost.

NDP amendment 63: All in favour? Opposed? I declare that lost.

NDP amendment 64: All in favour? Opposed? I declare that lost.

Government amendment number 65: All in favour? Opposed? Carried.

Shall schedule 4, section 12, as amended, carry? Carried.

We'll move to schedule 4, section 13, PC amendment number 66: All in favour? Opposed? Lost.

PC amendment 67: All in favour? Opposed? Lost.

NDP amendment 68: All in favour? Opposed? Lost.

Shall schedule 4, section 13 carry? Carried.

Schedule 4, section 14, NDP amendment number 69: All in favour? Opposed? Lost.

Shall schedule 4, section 14 carry? Carried.

Schedule 4, section 15, PC amendment number 70: All in favour? Opposed? Lost.

Government amendment number 71: All in favour? Opposed? Carried.

PC amendment number 72: All in favour? Opposed? Lost.

NDP amendment 73: All in favour? Opposed? Lost.

NDP amendment number 74: All in favour? Opposed? Lost.

NDP amendment 75: All in favour? Opposed? Lost.

Government amendment 76: All in favour? Opposed? Carried.

Shall schedule 4, section 15, as amended, carry? Carried.

Shall schedule 4, section 16 carry? Carried.

Shall schedule 4, section 17 carry? I heard a no. All in favour? Opposed? Carried.

Schedule 4, section 18, PC amendment number 77: All in favour? Opposed? Lost.

NDP amendment 78: All in favour? Opposed? Lost.

NDP amendment 79: All in favour? Opposed? Lost.

PC amendment 80: All in favour? Opposed? Lost.

Shall schedule 4, section 18 carry? Carried.

NDP amendment number 81: All in favour? Opposed? Lost.

Government amendment 82: All in favour? Opposed? Carried.

Schedule 4, section 19, NDP amendment 83: All in favour? Opposed? Lost.

Government amendment 84: All in favour? Opposed? Carried.

NDP amendment 85: All in favour? Opposed? Lost.

Government amendment 86: All in favour? Opposed? Carried.

PC amendment 87: All in favour? Opposed? Lost.

NDP amendment 88: All in favour? Opposed? Lost.

Government amendment 89: All in favour? Opposed? Carried.

Government amendment 90: All in favour? Opposed? Carried.

PC amendment 91: All in favour? Opposed? Lost.

Shall schedule 4, section 19, as amended, carry? Carried.

Schedule 4, section 20, government amendment 92: All in favour? Opposed? Carried.

Shall schedule 4, section 20, as amended, carry? Carried.

Schedule 4, section 21, government amendment 93: All in favour? Opposed? Carried.

Shall schedule 4, section 21, as amended, carry? Carried.

We'll do schedule 4, sections 22 to 26, inclusive. Shall schedule 4, sections 22 to 26, inclusive, carry? Carried.

Schedule 4, section 27, government amendment 94: All in favour? Opposed? Carried.

Shall schedule 4, section 27, as amended, carry? Carried.

Schedule 4, section 28, NDP amendment 95: All in favour? Opposed? Lost.

NDP amendment 96: All in favour? Opposed? Lost.

NDP amendment 97: All in favour? Opposed? Lost.

Government amendment 98: All in favour? Opposed? Carried.

Shall schedule 4, section 28, as amended, carry? Carried.

Shall schedule 4, section 29 carry? Carried.

We'll move to schedule 4, section 30, PC amendment 99: All in favour? Opposed? Lost.

Shall schedule 4, section 30 carry? Carried.

Schedule 4, section 31, government amendment 100: All in favour? Opposed? Carried.

Shall schedule 4, section 31, as amended, carry? Carried.

Mr. John Fraser: Motion 101?

The Chair (Mr. Monte McNaughton): Yes, everything is deemed to be moved, but government amendment 101 is out of order.

We'll move to schedule 4, section 32, government amendment 102: All in favour? Opposed? Carried.

Shall schedule 4, section 32, as amended, carry? Carried.

Shall schedule 4, as amended, carry? Carried.

Schedule 5, section 1, NDP amendment 103: All in favour? Opposed? Lost.

NDP amendment 103.1: All in favour? Opposed? Carried.

Shall schedule 5, section 1, as amended, carry? Carried.

Shall schedule 5, section 2 carry? Carried.

We'll move to NDP amendment 104: All in—

M^{me} France G  linas: Recorded vote.

The Chair (Mr. Monte McNaughton): Okay, we're doing a recorded vote on NDP amendment 104.

Ayes

Bailey, G  linas, Yurek.

Nays

Berardinetti, Fraser, Kiwala, Malhi.

The Chair (Mr. Monte McNaughton): I declare the amendment lost.

We'll vote on schedule 5, sections 3 to 17, inclusive. All in favour of schedule 5, sections 3 to 17, inclusive? Carried.

Shall schedule 5, as amended, carry? Carried.

So now we're back to the sections. Shall sections 1 to 3, inclusive, carry? Carried.

Shall the title of the bill carry? Carried.

Shall Bill 87, as amended, carry? Carried.

Shall I report the bill, as amended, to the House? Carried.

We are adjourned.

The committee adjourned at 1533.

STANDING COMMITTEE ON THE LEGISLATIVE ASSEMBLY

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Vice-Chair / Vice-Présidenté

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Mr. John Fraser (Ottawa South L)

M^{me} France Gélinas (Nickel Belt ND)

Mr. Jeff Yurek (Elgin–Middlesex–London PC)

Also taking part / Autres participants et participantes

Mr. Marcus Mazzucco, counsel, Ministry of Health and Long-Term Care

Mr. Taylor Ransom, counsel, Ministry of Health and Long-Term Care

Clerk / Greffier

Mr. William Short

Staff / Personnel

Mr. Ralph Armstrong, legislative counsel

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